

New _____ Renewal _____

License Fee: \$103.00

ESCORT, NUDE MODEL, OR BODY PAINTING LICENSE

Application

Applicant Name

Applicant Contact

Street Address _____ *City* _____ *State* _____ *ZIP Code* _____

Email Address _____ *Phone Number* _____

Business Name

Business Contact

Street Address _____ *City* _____ *State* _____ *ZIP Code* _____

Email Address _____ *Phone Number* _____

Applicant Information

Date of Birth _____

Place of Birth _____

Social Security Number _____

Race _____

Are you licensed in the State of Indiana? Yes _____ No _____

License Number _____

Former home address if lived at current address for less than three (3) years

Street Address _____ *City* _____ *State* _____ *ZIP Code* _____

Street Address _____ *City* _____ *State* _____ *ZIP Code* _____

Street Address _____ *City* _____ *State* _____ *ZIP Code* _____

Street Address _____ *City* _____ *State* _____ *ZIP Code* _____

Nature of Work Performed

Has the applicant, partner or any corporate officer of the business ever been arrested or convicted of any public offense concerning an act of violence, moral turpitude, sex offense including but not limited to prostitution or public indecency involving the act of touching oneself or another in a sexual manner? If yes, list type of conviction and the jurisdiction.

Yes _____ No _____

I understand that I may not ask for a refund of any of the fees if, for any reason, the Licensing Division cannot issue my license.

Yes _____ No _____

Please indicate that you agree or disagree by marking yes or no for the following statements.

1. Licensee is in good standing and has not had any license/registration to operate a business revoked/suspended.
Yes ____ No ____
2. Licensee is current with all City, County and State for any taxes, license fees, or any other indebtedness.
Yes ____ No ____
3. Licensee agrees to comply with the Revised Code of Indianapolis and Marion County and all other applicable laws ordinances, regulations, orders and decisions of public officials.
Yes ____ No ____
4. Licensee understands that the license may be suspended or revoked, and the licensee will be subject to prosecution if any applicable law, ordinance, regulation, order or decision is violated.
Yes ____ No ____
5. Licensee agrees to give the Department of Code Enforcement written notice once the business ceases to exist.
Yes ____ No ____

The undersigned affirms under penalty for perjury that the answers, representations and information provided in this application are true and correct.

Signature

Name Printed

Date